

Check Copy Request

Fax to:

713-244-3300

or

Mail to:

MemberSource Credit Union
Attn: Member Service Center
10100 Richmond Ave.
Houston, Texas 77042

Member Number: _____

Name (First, MI, Last): _____

Street Address: _____

City, State, Zip: _____

Check Information:

Date	Check Number	Amount	Payable To
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Please allow up to 10 business days for the delivery of your check copies. MemberSource Credit Union will charge a check copy fee based on the current fee schedule. Visit our website at www.membersourcecu.org for current fees or call 713-627-4000 or 800-877-8828.

Member Signature X _____